									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOR Effective December 8, 2004										10	8	13,9	06	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALI TYPE	- EI	VIIIY	OR	OTHER		
TOTAL CLAIMS								RAT	E	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	150.00	OR	BASIC FEE	300.00	
TOTAL CHARGEABLE CLAIMS			minus 20=		*			X\$ 25	 5=		OR	X\$50=		
INDEPENDENT CLAIMS			minus 3 =		*			X100=			OR	X200=		
ML	ILTIPLE DEPEN	IDENT CLAIM P	RESENT						=		OŘ	+360=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTA	L		OR	TOTAL		
M	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMAI	1 1	ENTITY	OR	OTHER		
r	(Column 1)			HIGH		(Column 3)		JIIMLL		ADDI-			ADDI-	
AMENDMENTA		REMAINING AFTER		PREVIO	USLY	PRESENT EXTRA	Н	RATE	Ξ	TIONAL		RĄTE	TIONAL	
	T-4nd	AMENDMENT	14:	PAID	FOR		ı	140.00		FEE そうてん		Vaca	_FEE_	
	Total	- 1916	Minus Minus		<u> </u>	=		X\$ 25	=	(MCX)	OR	X\$50=		
AM	Independent	NTATION OF MI	JLTIPLE DEPENDENT		CI AIM	1 -		X100	=	1200.00	OR	X200=		
	T WICH THEOD							±180:	-		OR.	+360=	·	
TOTAL POSITION TO												TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)									cc (LADE S		ADDII. FEEI		
NT B		CLAIMS REMAINING		HIGH!		ST				ADDI-	1		ADDI-	
		AFTER		PREVIO	USLY	PRESENT EXTRA		RATE		TIONAL FEE		RATE	TIONAL FEE	
AMENDMENT	Total	AMENDMENT	Minus	PAID I	-UH	=	l	X\$ 25		PEE_		X\$50=		
EN	Independent	*	Minus	Act of		=			-		OR			
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X100=			OR	X200=		
								+180=	•		OR	+360= .		
TOTAL ADDIT. FEE											OR	TOTAL ADDIT, FEE		
	(Column 1) (Column 2) (Column 3)										_			
ပ		CLAIMS REMAINING		HIGH! NUME	BER	PRESENT	[ADDI-			ADDI-	
ENT		AFTER AMENDMENT		PREVIO		EXTRA		RATE		TIONAL FEE		RATE	TIONAL FEE	
AMENDMENT C	Total	*	Minus	**		=		X\$ 25:	_		OR	X\$50=		
ME	Independent	*	Minus	***		Ξ.	 	X100=	<u>.</u> †		OR	X200=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								7					
onon												+360=		
** If the entry in column 1 is less than the entry in column 2, write "U" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."														
-	ii the "Highest Nu The "Highest Nurr	mber Previously Pai ber Previously Pai	ua For (Total o	o office is Independe	nt) is the	n 3, enter "3." highest numbe	r fou	nd in the	арр	ropriate box	in colu	umn 1.		